

PART B - FEE(S) TRANSMITTAL

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7590 01/29/2002
LISA M. SOLTIS
3600 WEST LAKE AVE.
GLENVIEW, IL 60025



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<i>Judy Stein</i>	(Depositor's name)
<i>Judy Stein</i>	(Signature)
09-23-02	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/168,585	10/08/1998	FRANK DAVIS	0001-001(B)	2675

TITLE OF INVENTION: SYSTEM FOR MAKING A HOLOGRAM OF AN IMAGE BY MANIPULATING OBJECT BEAM CHARACTERISTICS TO REFLECT IMAGE DATA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1280	\$0	\$1280	10/29/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHAHER, RICKY D	2872	359-010000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. *Lisa M. Soltis*
2. *MARK W. CROLL*
3. *Donald J. Breh*

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ILLINOIS TOOL WORKS INC

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Glenview, ILLINOIS

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature)

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L.M. Soltis

09-23-2002

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10/02/2002 KZEMDIE1 00000039 09168585

01 FC:142
02 FC:361

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